

# SUPERIOR COURT, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

☐ **BANNING** 155 E. Hays, Banning, CA 92220  
☐ **BLYTHE** 265 North Broadway, Blythe, CA 92225  
☐ **HEMET** 880 N. State St., Hemet, CA 92543  
☐ **INDIO** 46-200 Oasis St., Indio, CA 92201

☐ **MURRIETA** 30755-D Auld Road, Murrieta, CA 92563  
☐ **RIVERSIDE** 4050 Main St., Riverside, CA 92501  
☐ **RIVERSIDE** 4175 Main St., Riverside, CA 92501  
☐ **TEMECULA** 41002 County Center Dr., #100, Temecula, CA 92591

## THIS NOTICE OF APPEAL TO BE FILED NO MORE THAN 60 DAYS AFTER JUDGMENT IN THE COUNTY SUPERIOR COURT WHERE SENTENCE WAS IMPOSED

THE SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF \_\_\_\_\_

THE PEOPLE OF THE STATE OF CALIFORNIA,  
Plaintiff and Respondent,

v.

Defendant and Appellant.

)  
) Superior Court No. \_\_\_\_\_  
)  
) **NOTICE OF APPEAL**  
)  
) (After Plea of Guilty  
) or Nolo Contendere, or  
) After Probation Revocation  
) Based on Admission)

The defendant appeals from the judgment of this court entered

\_\_\_\_\_  
(Date of Sentencing)

Check one or more:

1. ☐ This appeal is based on the sentence or other matters occurring after the plea.
2. ☐ This appeal is based on the denial of a motion to suppress evidence under Penal Code section 1538.5.
3. ☐ This appeal challenges the validity of the plea. **(A WRITTEN REQUEST FOR CERTIFICATE OF PROBABLE CAUSE, SIGNED UNDER PENALTY OF PERJURY, MUST BE FILED WITH THE TRIAL JUDGE IF THIS BOX IS CHECKED. IT MUST SHOW WHY YOU THINK THE PLEA WAS NOT OBTAINED LEGALLY. PLEASE SEE THE ATTACHED FORM.)**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Defendant or Trial Counsel

(PAGE 1 OF 4) PLEASE BE SURE THE ATTACHED BACKGROUND INFORMATION FORM IS FILLED OUT.

### MOTION FOR APPOINTMENT OF COUNSEL ON APPEAL

I request the Court of Appeal to appoint an attorney to represent me in this appeal. I cannot afford to hire an attorney. This is a complete list of my property and income:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Defendant and Appellant

My trial attorney was: ☐ A Public Defender/Court-Appointed Attorney  
☐ An Attorney Paid by Myself ☐ Other \_\_\_\_\_

# REQUEST FOR CERTIFICATE OF PROBABLE CAUSE

*(This request must be completed, signed, and filed with the trial judge  
if Box 3 on the Notice of Appeal is checked.)*

I request a certificate of probable cause. The plea of guilty or nolo contendere, or the admission of a probation violation, was illegal because:

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I declare under penalty of perjury under the laws of the State of California that this statement is true.

Signature: \_\_\_\_\_  
Defendant or Trial Counsel

\_\_\_\_\_  
Date

## POINTS AND AUTHORITIES

A certificate of probable cause is a document issued by the trial court which certifies that at least one contention challenging the plea is not totally frivolous. (Penal Code section 1237.5; People v. Ribero (1971) 4 Cal.3d 55.) A common example of a contention which challenges the plea is that the trial court improperly denied the defendant's motion to withdraw his plea. The trial judge should issue the certificate wherever there is an honest difference of opinion about the issue. (People v. Ribero, supra, p. 63, fn 4). Signing the certificate **does not** mean the trial court believes the contention is "probably" meritorious. (People v. Ribero, supra.)

**The request for certificate of probable cause is GRANTED.**

\_\_\_\_\_  
Honorable \_\_\_\_\_, Judge

\_\_\_\_\_  
Date

## BACKGROUND INFORMATION

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Jail Booking No. \_\_\_\_\_ State Prison Inmate No.\* \_\_\_\_\_

Present Address\* \_\_\_\_\_ Phone: \_\_\_\_\_

Family member or friend who will always know defendant's address:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**\*IMPORTANT:** YOU, THE DEFENDANT, **MUST** TELL APPELLATE DEFENDERS, INC., OR THE COURT OF APPEAL WHEN YOU RECEIVE A STATE PRISON INMATE NUMBER OR WHENEVER YOUR ADDRESS CHANGES. IF YOU FAIL TO DO THIS, YOUR CASE MAY BECOME LOST.

\* \* \* \* \*

Trial Attorney: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

☐ Jury Trial ☐ Court Trial ☐ Plea ☐ Other (explain): \_\_\_\_\_

Crime(s) convicted of: \_\_\_\_\_

Sentence \_\_\_\_\_

Names of co-defendants and their counsel (whether joint or separate proceedings) \_\_\_\_\_

Are there now, or have there ever been, any related appeals, writs, or other proceedings before this or any other California appellate court?

☐ Yes ☐ No. If yes:

Appellate case number: \_\_\_\_\_ Title: \_\_\_\_\_

Possible Issues on Appeal (These are only suggestions. The attorney on appeal will make the final decision on which issues to raise):

## ARRANGEMENTS FOR COUNSEL ON APPEAL

Have you hired an attorney? ☐ Yes ☐ No. If yes:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

If you cannot afford to hire an attorney, you have the right to have one appointed and paid for by the court. Please fill out and sign the request for counsel on the bottom of the Notice of Appeal.

**FORMS FOR NOTIFYING APPELLATE DEFENDERS, INC.,  
OF YOUR CHANGE OF ADDRESS**

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Appellate Defenders, Inc., is a firm of appellate defense attorneys. We help manage cases in the Fourth Appellate District Court of Appeal. We find attorneys on appeal for defendants who cannot afford to hire one.

We cannot do this job unless we know where to find you. We must always know your **correct, current address**. When your attorney is appointed, he or she must have the same information.

*IT IS YOUR RESPONSIBILITY TO SEE THAT WE HAVE YOUR CORRECT ADDRESS AT ALL TIMES. IF YOU FAIL TO TELL US, YOUR CASE MAY BECOME LOST.*

*To help keep us informed, we are providing you with some forms to mail whenever your address changes. You don't have to use the forms, but they make it easier to get the information to us quickly. After your attorney is appointed, be sure to tell him or her, too.*

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**CHANGE OF ADDRESS**

Your Name: \_\_\_\_\_

Case Number (if known): \_\_\_\_\_ Date of Change: \_\_\_\_\_

New Address: \_\_\_\_\_

Mail to: Appellate Defenders, Inc.  
555 West Beech Street, Ste. 300  
San Diego, CA 92101

Be sure to send your attorney a form, too, if one has been appointed to your case.

(DETACH HERE)

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**CHANGE OF ADDRESS**

Your Name: \_\_\_\_\_

Case Number (if known): \_\_\_\_\_ Date of Change: \_\_\_\_\_

New Address: \_\_\_\_\_

Mail to: Appellate Defenders, Inc.  
555 West Beech Street, Ste. 300  
San Diego, CA 92101

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